

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr NICKNAME		OFFICE USE ONLY Date Received OCT 5 2020 PM 12:48 LMR
	FIRST Eric LAST		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	MI C SUFFIX		Date Hand-delivered or Date Postmarked Hand-Delivered
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 132 Driftwood Dr Cedar Park TX 78613		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER 496-5709	Receipt #
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr NICKNAME		Amount \$
	FIRST Kevin LAST		Date Processed 10.6.20
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	MI W SUFFIX		Date Imaged
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1001 Water Hyacinth Cove Leander TX 78641		
8 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 585-1300	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 7 / 1 / 2020 THROUGH 9 / 30 / 2020		
11 ELECTION	ELECTION DATE Month Day Year 11 / 3 / 2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Cedar Park City Council Place 4	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Eric C Boyce

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

4,605⁷⁹

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

6,337²¹

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

13,897¹⁴

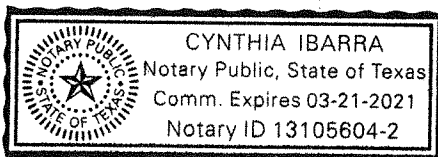
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

2000⁰⁰

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eric Boyce, this the 2nd day of October, 2020, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Cynthia Ibarra

Printed name of officer administering oath

Notary Public

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Eric C Boyce

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 4605⁷⁹

2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. ☐ SCHEDULE E: LOANS

\$

5. ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 4337²¹

6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED
TO FILER

\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10/4

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

7/10/20

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerardo Gozalez

6 Contributor address;

City;

State;

Zip Code

3440 Ranch Trls #1241 Cedar Park TX 78613

7 Amount of contribution (\$)

105⁵⁸

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

7/15/20

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James & Julie Nickerson

Contributor address;

City;

State;

Zip Code

136 Lochmont Loop Georgetown TX 78628

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/27/20

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jesse Wells

Contributor address;

City;

State;

Zip Code

14258 FM 2764 Unit A Leander TX 78641

Amount of contribution (\$)

105⁵⁸

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/28/20

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kevin Lancaster

Contributor address;

City;

State;

Zip Code

1001 Water Hyacinth Cove Leander TX 78641

Amount of contribution (\$)

100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 4
2 FILER NAME Eric C Boyce		3 Filer ID (Ethics Commission Filers)
4 Date 7/29/20	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Biggers 6 Contributor address; City; State; Zip Code 2607 Armatrading Dr Cedar Park, TX 78613	7 Amount of contribution (\$) 105 ⁵⁸
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7/30/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph Strader Contributor address; City; State; Zip Code 601 Oak Valley Dr Georgetown, TX 78626	Amount of contribution (\$) 105 ⁵⁸
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/31/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance Gunn Contributor address; City; State; Zip Code 2702 Rambler Valley Dr Cedar Park, TX 78613	Amount of contribution (\$) 105 ⁵⁸
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/11/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert O'Ferrall Contributor address; City; State; Zip Code 1301 Fernside Cedar Park, TX 78613	Amount of contribution (\$) 526 ⁶³
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 4

2 FILER NAME

Eric C Beyce

3 Filer ID (Ethics Commission Filers)

4 Date

8/12/20

5 Full name of contributor

Richard Cavender

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

1000⁰⁰

6 Contributor address;

City;

State;

Zip Code

PO Box 681237 San Antonio TX 78268

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/13/20

Full name of contributor

Jeff Baker

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

105⁵⁸

Contributor address;

City;

State;

Zip Code

2106 Camino Alameda Leander TX 78641

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/26/20

Full name of contributor

Stephen Phillips

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

263⁴⁷

Contributor address;

City;

State;

Zip Code

808 Norwalk Austin TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/27/20

Full name of contributor

HBA Home PAC

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

250⁰⁰

Contributor address;

City;

State;

Zip Code

1250 S Capital of Texas Hwy Austin TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:

4 of 4

2 FILER NAME

Eric C Bayce

3 Filer ID (Ethics Commission Filers)

4 Date

8/28/20

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mission Mortgage of Texas

6 Contributor address; City; State; Zip Code

8140 Exchange Dr Austin TX 78745

7 Amount of contribution (\$)

1000⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/1/20

Full name of contributor

☐ out-of-state PAC (ID# _____)

Stephen and Nancy Thomas

Contributor address; City; State; Zip Code

2002 Burrie Bishop Place Cedar Park TX 78613

Amount of contribution (\$)

500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/6/20

Full name of contributor

☐ out-of-state PAC (ID# _____)

Jeff Moore

Contributor address; City; State; Zip Code

9015 Meper Blvd Ste 120 Austin TX 78746

Amount of contribution (\$)

105⁵⁸

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/18/20

Full name of contributor

☐ out-of-state PAC (ID# _____)

Anne Duffy

Contributor address; City; State; Zip Code

2311 Erica Keith Ln Cedar Park TX 78613

Amount of contribution (\$)

26⁶³

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 6 2 FILER NAME Eric C Boyce 3 Filer ID (Ethics Commission Filers)

4 Date 7/24/2020 5 Payee name Cedar Park Chamber

6 Amount (\$) 150⁰⁰ 7 Payee address; City; State; Zip Code
350 Discovery Blvd Ste 207 Cedar Park TX 78613

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Sponsor Lunches
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 7/29/20 Payee name Facebook

Amount (\$) 25⁰⁰ Payee address; City; State; Zip Code
1 Hacker Way Menlo Park CA 94025

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertising Description Post
☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 7/31/20 Payee name Facebook

Amount (\$) 1⁸⁸ Payee address; City; State; Zip Code
1 Hacker Way Menlo Park CA 94025

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertising Description Post
☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 6	2 FILER NAME Eric C Boyce	3 Filer ID (Ethics Commission Filers)
4 Date 7/31/20	5 Payee name Michelle Johnson	
6 Amount (\$) 300	7 Payee address; City; State; Zip Code 107 Sun View Rd Bertram TX 78605	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 8/10/20	Candidate / Officeholder name Jennifer Henry (Virtually Everything 2025)	
Amount (\$) 100⁰⁰	Office sought Leander TX 78641	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees Advertising	Description Website Maintenance
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 8/12/20	Candidate / Officeholder name Facebook	
Amount (\$) 25⁰⁰	Office sought Menlo Park CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Post
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 6	2 FILER NAME Eric Q Boyce	3 Filer ID (Ethics Commission Filers)
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4 Date 8/13/20	5 Payee name Lovely Paper Tree
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6 Amount (\$) 324.75	7 Payee address; 1004 Rio Azul Cove	City; Leander	State; TX	Zip Code 78641
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Graphic Works/Website Maint.
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/14/20	Payee name Facebook
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Amount (\$) 25.00	Payee address; 1 Hacker Way	City; Menlo Park	State; CA	Zip Code 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adv	Description Post
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/24/20	Payee name Facebook
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Amount (\$) 35.00	Payee address; 1 Hacker Way	City; Menlo Park	State; CA	Zip Code 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adv.	Description Post
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>4 of 6</u>		2 FILER NAME <u>Eric C Bayce</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>8/25/20</u>		5 Payee name <u>Facebook</u>			
6 Amount (\$) <u>50⁰⁰</u>		7 Payee address; City; State; Zip Code <u>1 Hacker Way Menlo City CA 94025</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Adv.</u>		(b) Description <u>Post</u>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date Payee name					
<u>8/31/20</u>		<u>Lovely Paper Tree</u>			
Amount (\$) <u>108²⁵</u>		Payee address; City; State; Zip Code <u>1004 Rio Azul Cove Leander TX 78641</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Adv</u>		Description <u>Graphic Art on Campaign Materials</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date Payee name					
<u>9/1/20</u>		<u>Facebook</u>			
Amount (\$) <u>55⁰²</u>		Payee address; City; State; Zip Code <u>1 Hacker Way Menlo Park CA 94025</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Adv</u>		Description <u>Post</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 6		2 FILER NAME Eric C Bayce		3 Filer ID (Ethics Commission Filers)	
4 Date 9/2/20		5 Payee name Michelle Johnson			
6 Amount (\$) 300⁰⁰		7 Payee address; City; State; Zip Code 107 Sun View Rd Benton TX 78605			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting		(b) Description Consulting		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date Payee name					
9/4/20 lovely Paper Tree					
Amount (\$) Payee address; City; State; Zip Code					
135³¹ 1004 Rio Azul Cove Leander TX 78641					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adm		Description Graphic Art / Mailers Website work		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date Payee name					
9/8/20 Facebook					
Amount (\$) Payee address; City; State; Zip Code					
75⁰⁰ 1 Hacker Way Menlo Park CA 94025					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adm		Description Post		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>6 of 6</u>		2 FILER NAME <u>Eric C Bayce</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>9/9/20</u>		5 Payee name <u>Facebook</u>			
6 Amount (\$) <u>125⁰⁰</u>		7 Payee address; City; State; Zip Code <u>1 Hacker Way Menlo Park CA 94025</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Adv</u>		(b) Description <u>Post</u>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>9/16/20</u>		Payee name <u>Facebook</u>			
Amount (\$) <u>175⁰⁰</u>		Payee address; City; State; Zip Code <u>1 Hacker Way Menlo Park CA 94025</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Adv</u>		Description <u>Post</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>9/25/20</u>		Payee name <u>Axiom</u>			
Amount (\$) <u>4,327⁰⁰</u>		Payee address; City; State; Zip Code <u>800 W 47th St Ste 200 Kansas City MO 64112</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Adv</u>		Description <u>Drop Mailing Post Cards</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED